

ISSUE SLIP STAPLE AREA (for additional cross references)

1-c-825 U.S. PTO

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>[Signature]</i>	<i>10029</i>	<i>5/21/01</i>
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

✓	..... Rejected	N	..... Non-elected
"	..... Allowed	I	..... Interference
(Through numeral)...	..... Canceled	A	..... Appeal
-	..... Restricted	O	..... Objected

Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here